

MULTIPLE DEPENDENT
FEE CALCULATION SHEET
(FOR USE WITH FORM P-15)

APPLICANT(S)

64881

CLAIMS

AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.
1				
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50				
TOTAL IND.	2			
TOTAL DEP.	17	↔	↔	↔
TOTAL CLAIMS	19			

	*	*	*
	IND.	DEP.	IND.
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52			
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98			
99			
100			
TOTAL IND.			
TOTAL DEP.		↔	↔
TOTAL CLAIMS			